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2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

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23M1/0613

KURT L. GROSSMAN
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2700 CAREW TOWER
CINCINNATI, OH 45202

SERIES CODE/SERIAL NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

07/976,965

11/16/92

013

TRAN, K

2311

08/13/93

First Named
Applicant

MC CARTHY,

PATRICK D.

TITLE OF
INVENTION: CENTRALIZED CONSUMER CASH VALUE ACCUMULATION SYSTEM FOR MULTIPLE
MERCHANTS

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

2

MCY-06/KLG

364-405.000

P76

UTILITY

YES

\$585.00

11/15/93

3. Further correspondence to be mailed to the following:

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1. Wood, Herron & Evans

2.

3.

DO NOT USE THIS SPACE

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1 242 585.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

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(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

A. ☒ This application is NOT assigned.☐ Assignment previously submitted to the Patent and Trademark Office.☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

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Laureen E. Mains
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